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# THE TRANSNATIONAL THREAT OF HIV/AIDS IN AFRICA: IMPACT ON U.S. NATIONAL SECURITY

BY

ROBERT N. WHITE Department of the Army

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### USAWC STRATEGY RESEARCH PROJECT

## THE TRANSNATIONAL THREAT OF HIV/AIDS IN AFRICA: IMPACT ON U.S. NATIONAL SECURITY

by

Robert N. White Department of the Army

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The views expressed in this academic research paper are those of the author and do not necessarily reflect the official policy or position of the U.S. Government, the Department of Defense, or any of its agencies.

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### **ABSTRACT**

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HIV/AIDS as well as other diseases are reaching catastrophic levels on the African continent. The infections put at risk a large segment of the young adult populations. The group at risk includes the educated and skilled. This paper looks at the impact of HIV/AIDS on selected countries on the African continent. The paper explores the U.S. national interests in the region and how the impact of disease will affect those interests.

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## THE TRANSNATIONAL THREAT OF HIV/AIDS IN AFRICA: IMPACT ON U.S. NATIONAL SECURITY

As we move into the 21<sup>st</sup> century Sub-Saharan Africa continues to lag behind most of the world in economic development. Poverty and starvation continue to plague the continent. President Clinton declared that Africa is of vital interest to the United States, however, debate continues as to how real and how vital is that interest. The U.S. has many assistance programs for the area. Most of these programs are designed to promote democracy, promote economic growth, and assist with internal peacekeeping. Several countries made some limited progress in many of these areas. However, Sub-Saharan Africa now faces an enemy that can unravel all of this meager success. In this paper I will discuss the U.S. national interests in the area and how HIV/AIDS will impact these interests.

Data on HIV/AID in this paper should not be considered an accurate measure of the scope of the disease. Most of the developing countries have limited reporting systems and much of the infection may go underreported. The U.S. Census Bureau's HIV/AIDS Surveillance Data Base is a comprehensive source of available data and is a good source for deriving usable estimates<sup>1</sup>. The lack of exact data should not be considered significant. A discussion of an exact percentage of an infection prevalence, when it falls between 20 and 30 percent, is unnecessary since anything approaching that range will have devastating results. Anecdotal information is provided throughout this paper to illustrate the scope of HIV/AIDS infection.

### SCOPE

This paper focuses only on HIV/AIDS in Sub-Saharan Africa and its impact on U.S. security from the death and economic dislocation the disease will cause on the continent. Other diseases such as malaria, tuberculosis, hepatitis C, hemorrhagic fever, and infantile diarrhea will also impact the region. The migration of these diseases to the U.S. and other parts of the world is clearly described in a January 2000, National Intelligence Estimate.<sup>2</sup>

In order to look more closely at U.S. national interests in Africa, I have selected four countries. These are Kenya, Nigeria, South Africa, and Zimbabwe. These countries were selected for various reasons. Kenya has one of the more stable democracies in the region and has shown an interest in supporting peace keeping and humanitarian operations in and out of the region. Nigeria is a major trading partner of the U.S., a significant oil producer, and also fields a large military. South Africa has by far the strongest economy on the continent and provides many important minerals. Zimbabwe has a relatively small population, but is a country with a very high HIV infection rate.

### **BACKGROUND**

The statistics for HIV are staggering. In just the past two decades over 55 million people were infected with HIV, and an estimated 36 million are currently living with the HIV virus. AIDS has killed over 23 million people, three million of which died in 2000. In the year 2000, 5.3 million additional people were infected with HIV. David F. Gordon, the national intelligence officer for economics and global issues with the U.S. National Intelligence Council stated "There is a strong case to be made that AIDS is the most serious health threat in recorded history. It has already killed more people than all the soldiers killed in the major wars of the last century, and exceeds the toll taken by the bubonic plague in 1347. And the bad news is that we probably are still only in the early phases of the AIDS pandemic. AIDS is now the number one cause of death in Africa and fourth globally. Since the beginning of the pandemic two decades ago, 17.2 million Africans have died from AIDS - 2.6 million of them in 2000 (more than ten times the number of people who died in all of Africa's conflicts combined; and it was a bad year for conflict in Africa). Seventy-two percent of HIV positive people - 25. 9 million - live in Sub-Saharan Africa, which has less than 11 percent of the world's population. This is three times more than demographers predicted in 1991. Seven countries have HIV positive rates exceeding 20 percent and nine exceeding 10 percent. "3

In Sub-Saharan Africa, HIV is spread primarily through heterosexual intercourse as well as from mother to child at birth. Certain sexual customs and practices lead to the high infection rate. Africans also have high rates of untreated syphilis, gonorrhea, and other sexually transmitted diseases, increasing by twenty fold their chances of becoming infected with HIV.<sup>4</sup>

High incidence of HIV infection is not limited to those living in poverty. A South African truck driver making \$400 a month appears rich to local women who don't earn that much in a year. Men often leave their families to work in mines where they have the time and money to spend on prostitutes before returning home to spread the infection to wives and girlfriends. People with higher education levels have them same high incidence of HIV as the population in general. Men who are well educated and well paid often spend money on girlfriends in exchange for sex, pay for a prostitute, or set up a mistress in an apartment. Male schoolteachers have a very high incidence of HIV showing that education in no deterrent from infection. In the traditional African society, men in authority can often demand sex from powerless underlings. Educated women appear to be just as much at risk as their male counterparts. They are also mobile and can travel and party in ways poor rural women cannot.<sup>5</sup>

### **KENYA**

### **Statistics**

Population 30.3 million

Annual Population Growth Estimate 1.53%

Gross Domestic Product \$45.1 billion

Per capita GDP \$1,600

Defense expenditures \$315 million<sup>6</sup>

U.S. IMET funding (2000) \$425,000<sup>7</sup>

### **U.S. National Interests**

The State Department defines the primary U.S. interest in Kenya as the promotion of democracy as well as continued economic development and assistance with humanitarian concerns. Kenya is the principal point of access for the U.S. military and relief operations in the strategic horn of Africa, including for Sudan and Great Lakes region. The United States also works closely with the Kenyan Government in mediating conflicts, and with Kenyan nongovernmental organizations (NGO) in implementing the greater horn of Africa initiative (GHAI). The traditionally apolitical Kenyan military has participated in a number of international peacekeeping operations. Kenya's continued stability depends on strong sustainable, broadbased economic growth, further expansions of Kenya's democratic space, and respect for human rights.<sup>8</sup>

A cornerstone of United States policy, to be discusses later in this paper, is the development of African countries to support their own peacekeeping operations in their region. Kenya has demonstrated a willingness to provide it's military to support peacekeeping operations in the region as well as in other parts of the world. Ambassador Aubrey Hooks, U.S. State Department Special Coordinator for the African Crisis Response Initiative (ACRI) stated, "Now more and more governments – and I think Kenya is perhaps an example of this – have come to see that peacekeeping is, indeed, an important mission for the military and offers them a mission beyond the boundaries of their country. It is seen as a good thing. It burnishes the prestige of the military as an institution. It enhances the prestige of the country as a country that is engaged in a good humanitarian cause."

Promoting democracy is also a key U.S. interest. Kenyan leaders have held fast to a one party system, yet there seems to be a growing understanding of democracy and a desire for a multiparty system among the populace. Nicole Fink helped organize a survey as part of a training program sponsored by the non-governmental organization (NGO), International Republican Institute (IRI). The pollster explained that "fully 71 percent say, 'More than one party

is necessary to ensure that different points of view are represented in government, while 69 percent say, 'More than one political party is needed to provide real choices in leaders.' Even further, 58 percent say, 'More than one party ensures that people in government don't abuse their power." At the same time, she added, "awareness and support for constitutional reform are overwhelming" among Kenyans. Seventy-seven percent believe their constitution should be reformed, compared to 11 percent who do not.<sup>10</sup>

### Scope of HIV/AIDS in Kenya

The following numbers show the HIV prevalence in Kenya. The low risk category is defined as pregnant women, blood donors, or other persons with no know risk factors. The high risk category is defined as prostitutes and clients, sexually transmitted disease (STD) patients, or other persons with known risk factors.

|                | Major Cities |           | Outside Major Cities |                             |
|----------------|--------------|-----------|----------------------|-----------------------------|
|                | Low Risk     | High Risk | Low Risk             | High Risk                   |
| HIV Prevalence | 15.9%        | 74.7%     | 5.9%                 | not available <sup>11</sup> |

Kenya has a significant infection rate. More people are being infected each year than are dying from AIDS, which means the infection rate continues to grow.

### Impact on Kenya

AIDS has affected all levels of society in Kenya. Professional and skilled workers are no exceptions. A major shortfall in hospital staff in Nyanza, Kenya, stems from the fact that four out of every 30 nurses in the region have HIV-related illnesses, according to provincial Medical Officer Dr. Ambrose Misore. Dr. Misore noted, "Every weekend we raise funds for staff funerals. Because there is an embargo on employment, we are forced to operate on an increasingly lean staff." Dr. Misore is also quoted as saying that Kenya's failing sugar supply is related to the AIDS epidemic, as many young farmers in the sugar belt have died from the disease. The above observation on the failing sugar supply is supported by managers at one Kenyan sugar company who told UNAIDS they suffered a 50 percent loss in productivity over a recent two-year period. In Kenya, AIDS treatment costs are projected to account for 50 percent of health spending by 2005. The society of society is supported by 2005.

There are indications that reductions in infection incidence rates can be obtained through education and counseling. HIV voluntary counseling and testing (VCT) is not available in most regions in Africa. Researchers from Johns Hopkins University and the Center for AIDS Prevention Studies at the University of California at San Francisco examined the cost-effectiveness of HIV VCT among people in urban east Africa. A hypothetical group of 10,000 people seeking counseling resulted in 1,104 HIV infections averted in Kenya and 895 in

Tanzania. The researchers believe VCT is cost-effective and should become part of national HIV prevention efforts in these countries. By targeting HIV-infected clients and couples the number could be reduced even more.<sup>14</sup>

In an additional study, researchers assessed the efficacy of HIV VCT in reducing unprotected intercourse among 3,120 individuals and 586 couples In Kenya, Tanzania, and Trinidad. All of the individuals were unmarried, and two-thirds of the couples were unmarried. The researchers found that individual men and women who were counseled were more likely to curtail the amount of unprotected sex with non-primary partners. Men saw a 35 percent reduction and women a 39 percent reduction with counseling. Couples who had VCT also significantly reduced unprotected sexual acts with their enrollment partners, although there were no differences in unprotected sex with non-enrollment partners. The researchers conclude that the findings lend support for the use of VCT in HIV prevention in developing countries, especially in sub-Saharan Africa. <sup>15</sup>

### Impact on U.S. National Interests

The IRI survey indicates a popular support for democratic reform and an understanding of basic democratic principles. This understanding is a clear indication that the major U.S. interest in promoting democracy has a significant potential for success. The Kenyan government and military's growing interest in participating in peacekeeping operations fits well into the U.S. policy of assisting Africans to provide for their own regional peacekeeping requirements. Kenya will face a formidable task to sustain economic growth as HIV infection increases and a much larger number of people begin to die of AIDS. Loss of professional and skilled workers will negatively impact the economy, government, and military within the next five to ten years. This negative impact will continue to grow unless a solution is found.

#### **NIGERIA**

### **Statistics**

Population 123.3 million

Annual Population Growth Estimate 2.67%

Gross Domestic Product \$110.5 billion

Per capita GDP \$900

Defense expenditures \$2.1 billion (estimate)<sup>16</sup>

U.S. IMET funding (2001) \$650,000<sup>17</sup>

### **U.S. National Interests**

The State Department describes U.S. interests in Nigeria as the continued development of democracy and the development of a stronger economy for Sub-Saharan Africa's most populous nation. Other interests include law enforcement to reduce narcotics trade and Nigeria's ability to provide humanitarian assistance in the region. Nigeria's resources and population, as well as political and economic influence, make it a key country in the region. Nigeria is at a crucial point in its history. Since he came to power in June of 1998, head of State General Abdulsalam Abubakar instituted widespread political and economic reforms, including the democratic election of a civilian president, a position to which he was elected. These reforms dramatically increased the likely hood of sustainable democracy in Nigeria. U.S. investment in Nigeria is approximately \$7 billion, mostly in the petroleum sector, and Nigeria produces almost ten percent of all oil imported into the United States. Nigerian drug trafficking organizations control courier networks that move large quantities of heroin from Asia to the United States.<sup>18</sup>

Nigeria has demonstrated an important commitment to regional stability and peacekeeping, spending an estimated \$10 billion over the last ten years on peacekeeping operations. As the largest country and preponderant military power in the Economic Community of West African States (ECOWAS), Nigeria provided most of the "muscle" deployed by ECOMOG, the military arm of ECOWAS, to restore democratic governments in Liberia and Sierra Leone. The United States has contributed over \$100 million to these efforts. The Nigerian military, with the size, experience, and readiness to undertake peacekeeping and stability missions has been an important partner for U. S. engagement. Nigeria has offered at least five battalions for service in Sierra Leone for the United Nations Mission in Sierra Leone (UNAMSIL) peacekeeping mission.<sup>19</sup>

In August 2000 President Clinton announced new initiatives to expand trade and investment between the United States and Nigeria. These measures, which Include duty-free access to the U. S. market for many Nigerian products and new financing arrangements for Nigerian importers of US products, are intended to deepen the economic partnership between the two countries. The United States is Nigeria's top export market, accounting for 44 percent of its export earnings. In 1998, the United States imported \$10.5 million in agricultural goods and \$3.8 million in textiles and apparel from Nigeria. The elimination of tariffs under the Generalized System of Preferences (GSP) will increase U.S. demand for such products as cocoa, cotton, handmade traditional textiles, minerals and metals, and forest products. US tariffs currently range from 2 percent to 20 percent on these products. Nigeria is also being

considered for eligibility under the recently enacted African Growth and Opportunity Act, which will confer duty-free treatment on virtually all products exported from qualifying Sub-Saharan African countries, including those ineligible for such treatment under existing GSP product limits.<sup>20</sup>

The U.S. Trade and Development Agency (TDA), after years of inactivity in Nigeria, signed its first grant agreement July 26, 2000, for an important sugar industry feasibility study project in northern Nigeria. TDA has also recently approved funding for projects totaling over \$1.6 million for expansion of Nigerian use of domestic natural gas, refinery modernization to produce upgraded fuels for the Nigeria market, development of a major new cement factory, and management of the radio frequency spectrum for telecommunications access. These commitments could lead to the development of nearly \$1 billion in investments in crucial economic sectors.<sup>21</sup>

### Scope of HIV/AIDS in Nigeria

The following numbers show the overall HIV prevalence in Nigeria.

| Major Cities |           | Outside Major Cities |                     |  |
|--------------|-----------|----------------------|---------------------|--|
| Low Risk     | High Risk | Low Risk             | High Risk           |  |
| 6.7%         | 30.5%     | 5.0%                 | 60.6% <sup>22</sup> |  |

Nigeria's infection rate is not as high as most countries in the southern parts of the continent. It is, however, high by most world standards and can be expected to continue to increase.

### Impact on Nigeria

**HIV Prevalence** 

Nigeria's large population and lack of a national HIV/AIDS education program put it at risk for the increased spread of infection. Much of the Nigerian population is Muslim. While Islamic African nations have lower HIV prevalence than other countries in Sub-Saharan African, this may not prevent the spread of the disease. Nigerian practice many of the sexual traditions found in other parts of the region. HIV prevalence has exceeded the five percent level, a level at which the incidence of infection began rapid increases in other countries. There are no programs in place to prevent the same trends that brought other Sub-Saharan countries to the higher HIV prevalence. Without such programs it can be expected that Nigeria will follow these trends to even higher rates of HIV/AIDS.

### Impact on U.S. National Interests

The current Nigerian inclination toward democracy is a key interest of the U.S. A strong democracy in Nigeria could be a stabilizing influence in the region and could lead to controls on narcotics trafficking. Nigeria's large army can continue to assume humanitarian and peacekeeping rolls in the region. While Nigeria is an important trading partner of the U.S., the

potential for increase trade is vast with such a populous country. However, with HIV/AIDS prevalence now above the five percent level, their potential may not be reached unless action is taken to reduce the incidence of infection.

### SOUTH AFRICA

### **Statistics**

Population 43.4 million

Annual Population Growth Estimate 0.5%

Gross Domestic Product \$296.1 billion

Per capita GDP \$6,800

Defense expenditures \$2.1 billion<sup>23</sup>

U.S. IMET funding (2001) \$825,000<sup>24</sup>

### **U.S. National Interests**

According to the State Department, both democracy and U.S. economic prosperity are at stake in South Africa. South African political stability is key to the stability of the region, and the United States is the largest investor in South Africa. Successful transition to democracy will mean enhanced prospects for increased U.S. trade and investment. U.S. interests in South Africa also include law enforcement and their ability to control their borders in the fight against international crime and narcotics trafficking. A large number of American citizens travel and work in South Africa and their safety will continue to be of interest.<sup>25</sup>

### Scope of HIV/AIDS in South Africa

The following numbers show the overall HIV prevalence in South Africa.

Major Cities Outside Major Cities
Low Risk High Risk Low Risk High Risk
HIV Prevalence 32.5% 50.3% 9.9% not available<sup>26</sup>

The South African infection rate is very high especially in urban areas. This may be due in part to the large number of migrant works from within the country and from other countries. The mining industry employs workers from many parts of Africa. In addition, the South African economy is stronger than other African countries and supports a vigorous trucking industry and truck drivers are known to facilitate the spread of HIV due to their travels and sexual habits.

Ironically, apartheid shielded South Africa from the epidemic. The South African government imposed restrictions of movement within and outside the country. The country was also isolated politically and economically by a global boycott imposed to protest its treatment of blacks. When apartheid ended in 1991, South Africa's borders began to open, and the country

resumed trade with its neighbors. That is when HIV exploded. Barely one percent of the country's adult population was infected ten years ago. Today over 20 percent are infected. The economic boom that came with the end of apartheid is now in serious jeopardy.<sup>27</sup>

The skilled and educated population has a high infection rate in South Africa. According to a report in the Johannesburg Star newspapers, carried by UPI, about 20 percent of South Africa's registered nurses are HIV-positive. The paper quoted Dr. Annette van der Merwe of the Hospital Association of South Africa, who told participants at a medical conference in September 2000, that "over 50 percent of first-year nursing students at a nursing school in Guateng province have HIV." Another participant at the conference, Eileen Brannigan of the Netcare hospital group, said AIDS was significantly affecting the healthcare industry. "We are sitting with nurses who are dying now and the student are even worse off," she said.<sup>28</sup>

### Impact on South Africa

The infection of educated and skilled workers in South Africa is causing a high rate of loss of middle and upper-level managers to AIDS. HIV/AIDS also makes it difficult to replace those who die. This high death rate of is also being seen among skilled workers in the mining and other key sectors. According to one expert, South African companies will begin to feel the full impact of the AIDS epidemic by 2005. One study of the projected impact of AIDS on employee benefit costs in South Africa concludes costs will nearly triple to 19 percent of salaries from 1995 to 2005, substantially eroding corporate profit.<sup>29</sup>

South Africa's only survey of HIV prevalence among college students, done at the University of Durban-Westville, revealed HIV prevalence of 26 percent in women and 12 percent in men aged 20 to 24. Those findings are consistent with the latest numbers from UNAIDS, which last in December 2000, reported that a quarter of South African women in their 20s carries the virus that causes AIDS.<sup>30</sup>

The governments and leaders of most countries affected by AIDS have been very slow to react. South Africa is one of the worst offenders. By far the worst offender is Thabo Mbeki, President of South Africa. He made claims to have personally investigated the disease and doubts that HIV leads to AIDS. He questioned whether AZT, one of the most useful medicines in slowing the progress of HIV, really works. Nelson Mandela spoke out only once about the disease while he was President. South Africa refused to give AZT to pregnant women close to term, even though it greatly reduces the spread of HIV to newborns.<sup>31</sup>

Education on AIDS has been shown to work in South Africa. Ford Motor Company flew in officials from the Centers for Disease Control and Prevention to educate local executives in its plant in Pretoria. Later the plant shut down operations and assembled everyone on the

factory floor for a day of seminars, a speech from the local CEO, and dramas on AIDS. They installed condom dispensers and plastered walls with posters proclaiming Ford's obligations to HIV-positive workers. The company has brought in employees' wives and teenage children to teach them about prevention. Company officials are hopeful that HIV rates of Ford's workers will continue to remain below the national average.<sup>32</sup> The success of HIV education at this one plant is an indication of what the leadership of South Africa could accomplish if HIV education was made a national priority.

### Impact on U.S. National Interests

The U.S. saw South Africa's peaceful transition to black majority rule and true democracy as a significant boost to stability and democracy in the region. A stable South Africa in an otherwise unstable Southern Africa is critical to the success of all U.S. interest in the area. South Africa has the largest economy on the continent with large amounts of natural resources. The county also has a well-educated populace and a skilled workforce. The U.S. has long had a strong economic relationship with South Africa, other than during their period of isolation due to international pressures against apartheid. While South Africa is by far the largest trading partner of the U.S. in Africa, there is potential for far greater trade. The extremely high HIV/AIDS will result in heavy loss of leaders in government, military, and the private sector. This loss of leadership will negatively impact the economy as well as stability in the country and the region. The U.S. efforts to improve trade, support the growth of the economy, as well as a stable democracy, may be difficult unless South Africa finds a solution to its HIV problems.

### ZIMBABWE

### **Statistics**

Population 11.3 million

Annual Population Growth Estimate 0.26%

Gross Domestic Product \$26.5 billion

Per capita GDP \$2,300

Defense expenditures \$327 million<sup>33</sup>

U.S. IMET funding (2001) \$325,000<sup>34</sup>

#### **U.S. National Interests**

The State Department defines the principal U.S. interests in Zimbabwe as democracy. Zimbabwe has the second largest economy in southern Africa, thus a stable and prosperous Zimbabwe is crucial to stability and prosperity in the region. The U.S., through USAID,

continues to promote sound macroeconomic policies, broaden private ownership, and strengthen natural resource management.<sup>35</sup>

Zimbabwe continues to make only small progress in creating a free and open political system. The government of Zimbabwe is far from being a model of democracy. "The United States is very concerned by events in Zimbabwe, which constitute government harassment of a legitimate opposition political party, the Movement for Democratic Change (MDC)," State Department Deputy Spokesman Philip Reeker was quoted as saying in September 2000.<sup>36</sup>

Zimbabwe has one of the highest HIV prevalence rates in the world. Without strong leadership, which is not evident, the long-term stability of the country, politically and economically, is questionable.

### Scope of HIV/AIDS in Zimbabwe

The following numbers show the overall HIV prevalence in Zimbabwe.

|                | Major City |           | Outside Major Cit |                    |
|----------------|------------|-----------|-------------------|--------------------|
|                | Low Risk   | High Risk | Low Risk          | High Risk          |
| HIV Prevalence | 28.0%      | 86.0%     | 19.3%             | 71.8 <sup>37</sup> |

Zimbabwe has one of the highest HIV infection rates of any country in Africa. Between 20 percent and 25 percent of the population is infected with HIV. In some parts of the country, pregnant women have extremely high infection rates, for example, 73 percent of the pregnant women in Beit Bridge, Zimbabwe are infected with AIDS.<sup>38</sup>

Counselors at clinics struggle to help their patients. In Africa, HIV is primarily transmitted via heterosexual sex and from mother to child. Women are often the focus of studies, since they visit clinics during pregnancy and to obtain contraceptives. However, HIV's spread is furthered by the nation's male-dominated society and the fact that many men leave their families behind when they travel to the cities to find work, returning home only infrequently. As a result, some of the men visit prostitutes or take girlfriends, while some of the wives sell sex to make ends meet.<sup>39</sup>

### Impact on Zimbabwe

It is estimated that a quarter of the adult population of Zimbabwe is now infected with HIV. In Zimbabwe, more than half the meager health budget is spent on treating AIDS. It is estimated that 30 to 50 percent of Zimbabwe's farmland previously used for cash crops is now being used for subsistence farming because of the deaths of so many farm workers. As the death rate from AIDS soars, institutional and societal structure will continue to collapse. The currently overburdened health system will not keep up with demand. Government and military organizations will loose many of their key leaders. The family structure that normally takes care

of orphaned children will not be able provide for the large numbers of parentless children. This will leave millions of orphans on their own who, if they survive, will have little chance of education or opportunities to become productive citizens.

### Impact on U.S. National Interests

U.S. interests in Zimbabwe center on the country's ability to develop and sustain a stable democracy. While the current leadership's commitment to democracy is questionable, it is certain the death toll of AIDS will make good governance very difficult under any circumstance. An unstable government in Zimbabwe will have a destabilizing affect on all of southern Africa. Zimbabwe can expect negative economic growth over the next decade. The peoples inability to feed themselves and the countries inability to assist will lead to migration pressures in the region. Large numbers of people dying from AIDS and starvation will overwhelm NGOs ability to assist while putting the safety of NGOs entering the country at risk. Pressure will increase on developed countries, including the U.S., to provide support that may include peace enforcement.

### **U.S. REGIONAL INTERESTS AND POLICY**

### **Promote Democracy and Economic Growth**

The United States policy has long focused on creating the conditions for the development of stable democracies and economic growth in Sub-Saharan Africa. Most U.S. foreign aid to the region followed this policy. The U.S. provides aid indirectly for the area through agencies such as the Trade Development Agency (TDA) which helps American businesses compete for infrastructure and industrial projects in emerging markets. Funds are also provided through International Organizations (IO) including the World Health Organizations, the North Atlantic Treaty Organization, the World Trade Organization, and 44 others. Most direct aid is provided on a regional basis rather than directly to individual countries. The U.S. funds the U.S. Agency for International Development (USAID), who's purpose is to create the conditions for economic growth, promote stable democracies, improve human health, basic education, and the environment. The funding for USAID includes the Development Fund for Africa that supports all of the USAID goals in Africa. Also budgeted are funds for the African Development Foundation (ADF) to develop micro and small enterprises, foster grass roots trade, increase small investments in order to alleviate poverty and promote sustainable development.<sup>41</sup>

In one recent initiative USAID, in collaboration with U.S. research groups and African organizations has launched a series of initiatives to use the benefits of agricultural

biotechnology throughout Africa to enhance food safety security. This multidimensional approach to food security problems is aimed at developing collaborative links between U.S. and African public and private organizations academic institutions, and non-governmental organizations.<sup>42</sup>

### **HIV/AIDS Impact on Policy Success**

Despite some breakthroughs in treatment and techniques for preventing AIDS, the epidemic in Sub-Saharan Africa continues to grow. The broader economic and social consequences are becoming clear, and they are not good. Gross domestic product (GDP) in many countries will decline by as much as 20 percent by 2010.<sup>43</sup>

The devastating social and economic consequences and human tragedy of AIDS have not been felt anywhere as severely as in the countries of Sub-Saharan Africa. Hard won gains in life expectancy, child survival, education, and economic development are eroding in many countries on the African continent. According to the World Bank, the life expectancy in nine African countries with AIDS infection rates over 10 percent has declined by 17 years, from 64 to 47 years of age. In many countries in the region, infant mortality is expected to double over the next decade. UNAIDS officials estimate that the impact on productivity, profitability, and foreign investment will result in increasing economic losses. Barclays' Bank and British Petroleum have stated that they hire two people for every job, assuming that one will die of AIDS.<sup>44</sup>

According to USAID officials, children are forced to become heads of household, unable to attend school because they must try to find food for their siblings. Currently, there are approximately 8 million African AIDS orphans and UNAIDS estimates that 42 million children will lose one or both parents to AIDS in the next decade. World Bank President James Wolfensohn has declared AIDS to be the single biggest threat to economic development in Sub-Saharan. Some Sub-Saharan African countries have high rates of malarial infection and combined with AIDS the results are devastating.

### Regional Peacekeeping

In recent years the U.S. has initiated efforts designed to assist African countries to respond effectively to crisis without assistance from non-African. The importance for the U.S. is for there to be an African ability to maintain or reestablish peace with African troops. Such ability could prevent the need to send U.S. troops into such volatile areas.

The State Department budget includes funding for Voluntary Peacekeeping Operations which includes the African Crisis Response Initiative, discussed below, and regional allocations for Africa to help ensure the U.S. ability to react quickly is support of multilateral peace activities.

The budget also includes funding for the more traditional International Military Education Training (IMET) for specific countries.<sup>47</sup>

### African Crisis Response Initiative (ACRI)

The African Crisis Response Initiative is a U.S. initiative that seeks to help African nations to respond to humanitarian crises and peacekeeping missions in their region. ACRI seeks to promote peace and stability on the continent and to help African nations to contain the deadly conflicts that have plagued that continent. ACRI's objective is to enhance the capacity of African nations to better perform peacekeeping and relief tasks and thus encourage regional self-reliance.<sup>48</sup>

The European Command and Special Operations Command are involved in this program with Special Forces providing most of the training. ACRI's long-term objective is to build a peacekeeping and humanitarian assistance capacity in Africa of about 12,000 trained military personnel. Deployment of ACRI-trained troops is a decision to be made by the ACRI partner nations, in response to a request from international organizations, such as the United Nations or the Organization of African Unity (OAU), or a subregional organization, such as the Economic Community of West African States (ECOWAS). ACRI-trained troops could also participate in a multinational peacekeeping coalition in Africa or elsewhere. U.S. Army instructors in a professional program of peacekeeping and humanitarian relief operations conduct initial battalion training. The initial training includes instruction in military operational skills, command and staff operations, and computer simulated exercises. Observance of human rights' issues of humanitarian law, negotiation and mediation, and other humanitarian concerns relevant to peacekeeping are interwoven into the training program.<sup>49</sup>

Integration of the international relief community into the ACRI training program is a vital aspect of the initiative. Staffs from a number of organizations have participated in ACRI training programs. They have helped prepare exercise scenarios, presented summaries of their organizations' programs, held open forums with military personnel of the host nation, and have participated in computer-assisted simulation and field exercises. The following organizations have participated in or have lent their support to the ACRI training programs:

- UN High Commissioner on Refugees (UNHCR)
- International Committee of the Red Cross (ICRC)
- International Federation of Red Cross and Red Crescent Societies (IFRC)
- UN World Food Programme (WFP)
- AFRICARE
- UN Children's Fund (UNICEF)

- World Vision
- U.S. Agency for International Development (USAID)
- International Institute of Humanitarian Law (IIHL)
- Refugees International<sup>50</sup>

### Africa Regional Peacekeeping (PKO)

The primary U.S. interest served by PKO is humanitarian. According to the U.S. Department of State, regional instability and conflict pose the greatest immediate threat to U.S. economic and political interests in sub-Saharan Africa. Africa's own economic and political progress, humanitarian well-being, refugees, and internal conventional conflicts - that invariably spill over to adjoining areas - compound the problem. Africa Regional Peacekeeping funds provide a modest means of supporting African conflict resolution and peacekeeping operations without the involvement of U.S. military forces on the ground.<sup>51</sup>

### **HIV/AIDS Impact on Policy Success**

AIDS threatens to hamper international security and peacekeeping efforts as militaries and military recruitment pools experience increased deaths and disabilities from the disease. The greatest impact will be among hard-to-replace officers, noncommissioned officers and enlisted soldiers with specialized skills and among military forces with advanced weapons and weapons platforms of all kinds.<sup>52</sup>

HIV/AIDS prevalence in the militaries of the heavily affected countries is considerably higher than their civilian populations, owing to risky lifestyles and deployment away from home. Commencement of testing and exclusion of HIV-positive recruits in the militaries of a few countries such as Uganda is reducing HIV prevalence but it continues to grow in most militaries where it ranges as high as 80 percent.<sup>53</sup>

Mounting infectious disease-caused deaths among the military officer corps in military-dominated and democratizing polities also may contribute to the deprivation, insecurity, and political machinations that incline some to launch coups and counter-coups. It is difficult to make a direct connection between high AIDS prevalence in military forces and performance in battle. But, given that a large number of officers and other key personnel are dying or becoming disabled, combat readiness and capability of such military forces are bound to deteriorate.<sup>54</sup>

### CONCLUSION

The current United States policy and interests in Sub-Saharan Africa of promoting democracy, economic growth, and regional peacekeeping capabilities seems reasonable. Stable democracies and economic growth should diminish the necessity for intervention by the

U.S. and other non-African countries. Economic growth and stability can open an area of vast potential that could stimulate the U.S. and global economies.

The Clinton Administration demonstrated increased interest in Africa, yet the new Bush administration may reduce the importance of Africa within United States foreign policy. There are two African-Americans in key roles in the new administration, but neither is expected to push African issues. President Bush has said that Africa does not fit into U.S. strategic interests<sup>55</sup> A U.S. disengagement in the area may have undesirable consequences. Voids will be filled and may be filled by countries such as China. Also areas of instability may be influenced more my factions supporting radical Islamic causes.

The initiative to assist African countries in providing the military for peacekeeping requirements in their own region is a seemingly logical, though unproven, political and cost effective step. It provides the potential for a professional peacekeeping force that could reduce the need for non-African military forces on the continent. In addition, the professional military training provided under ACRI can also further U.S. goals for which IMET was established. Those goals include fostering greater respect for and understanding of the principle of civilian control of the military, improved military justice systems, and international recognition of human rights.

HIV/AIDS will influence the effectiveness of U.S. policies in Sub-Saharan Africa. The impact of HIV/AIDS on continent will be devastating. High death rates will reduce the GDP of some of the strongest economies by up to 20 percent by 2010. Professionals in government and health care as well as other skilled workers will not be spared. The impact of millions of orphans, lose of government, civic, and private sector leaders, and economic problems will result in more social upheaval. At the time when need for a peacekeeping force is increasing, HIV/AIDS will cause large loses in the ranks of the militaries of the region, making them less able to assist in peacekeeping and humanitarian operations.

The epidemic will lead to heavy involvement of nongovernmental organizations (NGO) and international organizations (IO) attempting to relieve some of the suffering. These NGO and IO will require protection and support due to the instability in the region. It is unlikely that that protection and support can all be provided by Sub-Saharan African countries' militaries where HIV/AIDS continues to go unchecked. Regardless of U.S. policy at the time, it is unlikely that any President will be able to resist the pressure of television coverage of the suffering. We can anticipate that the U.S. military, as well as other non-African militaries, will be drawn into this region in the absence of viable regional forces. The situation will be one the military will find

difficult as it will be much like that faced in Somalia - only far more widespread - with nonstate players and thugs heavily involved in conflict.

Africa can change the course of HIV/AIDS on the continent. There is evidence that education and training can significantly reduce the incidence of infection. A few previously mentioned programs have shown potential. In Uganda, where the government has taken an aggressive approach, HIV prevalence has declined among pregnant women and young people. Fe Yet, there has been little emphasis place on HIV/AIDS education in most countries. While it is too late to avoid millions of deaths, immediate action can reduce the devastating impact of the disease. The leaders of Sub-Saharan nations must quickly demonstrate strong leadership and commitment by implementing nationwide basic HIV prevention education. The U.S. policy and initiatives in Sub-Saharan Africa will fail unless the spread of HIV/AIDS on the continent is controlled. The UNAIDS director, Peter Piot supports the position that development aid for poor nations is useless unless something is done to help fight AIDS. He stated "There is no point in investing in development when the labor force is dying from AIDS."

### RECOMMENDATION

The United States should make the reduction of HIV/AIDS infection a cornerstone of its policy in Sub-Saharan Africa. The policies of promoting democracy, economic development, and regional peacekeeping are sound. However, the situation is now at a point where the policy in these areas should be driven by a sound HIV/AIDS strategy, and these should not be a subset of other policies. The U.S. should make all foreign aid to Sub-Saharan Africa contingent upon those countries implementing comprehensive basic HIV/AIDS education throughout their territory. The United States should work with other nations, such as the United Kingdom and France, providing aid to the area to implement strong HIV/AIDS policy approaches in Sub-Saharan Africa.

WORD COUNT = 6712

### **ENDNOTES**

- <sup>1</sup> U.S. Census Bureau International Programs Center, Health Studies Branch, <u>HIV/AIDS</u> <u>Surveillance Data Base</u> [CD-ROM], June 2000.
- <sup>2</sup> John C Gannon, "The Global Infectious Disease Treat and Its Implications for the United States" National Intelligence Council; January 2000; available from <a href="http://www.odci.gov/cia/publications/nie/report/nie99-17d.html">http://www.odci.gov/cia/publications/nie/report/nie99-17d.html</a>; accessed 9 November 2000.
- <sup>3</sup> David Gordon, "AIDS May Be Most Serious Health Threat in Recorded History." Speech, African Chiefs of Mission Meeting, Nairobi, Kenya, 11 January 2001; Available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>; Internet; accessed 15 January 2001.
- <sup>4</sup> Brian O'Reilly, "Death of a Continent," <u>Fortune</u> 142 (13 November 2000): 258 [database on-line]; available from UMI ProQuest Direct, Bell & Howell, UMI publication no. 00158259.
  - <sup>5</sup> Ibid.
- <sup>6</sup> Central Intelligence Agency, <u>World Fact Book 2000</u>, available from <a href="http://www.odci.gov/cia/publications/factbook">http://www.odci.gov/cia/publications/factbook</a>>; Internet; accessed 6 March 2001.
- <sup>7</sup> Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> Fiscal Year 2001 (Washington, D.C.: U.S. Department of State, 7 February 2000), 57.
- <sup>8</sup> Department of State, <u>Congressional Presentation for Foreign Operations: Fiscal Year</u> 2000 (Washington D.C.: U.S. Department of State, 1999), 122.
- <sup>9</sup> Aubrey Hooks, "ACRI: Working with African Nations to Build Regional Stability," interview by Susan Ellis, available from <a href="http://usinfo.state.gov/regional/af/acri/interview.htm">http://usinfo.state.gov/regional/af/acri/interview.htm</a>; internet; accessed 15 January 2001.
- <sup>10</sup> Jim Fisher-Thompson, "Kenyan Survey Shows Firm Support for Multiparty Democracy," 12 January 2001; available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>; internet; accessed 15 January 2001.
  - <sup>11</sup> Census Bureau, <u>HIV/AIDS Surveillance Data Base</u>.
- <sup>12</sup> Agai Yier, "Kenya: High AIDS Rate Among Nurses," African News Service, 30 August 2000; available from <a href="http://www.hivdent.org/publicp/inter/ppinkharan082000.htm">http://www.hivdent.org/publicp/inter/ppinkharan082000.htm</a>; Internet; accessed 15 January 2001.
  - <sup>13</sup> Gordon.
- <sup>14</sup> Michael Sweat, Steven Gregorich, and Gloria Sangiwa, "Cost-Effictiveness of Voluntary HIV-1 Counselling and Testing in Reducing Sexual Transmission of HIV –1 in Kenya and Tanzania," 8 July 2000; available from <a href="http://www.hivdent.org/publicp/inter/ppceohrir082000.htm">http://www.hivdent.org/publicp/inter/ppceohrir082000.htm</a>; Internet; accessed 15 January 2001.

- <sup>15</sup> Thomas J. Coates, Olga Grinstead, and Steven Gregorich, "Efficacy of Voluntary HIV-1 Counselling and Testing in Individuals and Couples in Kenya, Tanzania, and Trinidad: A Randomized Trial," 8 July 2000; available from <a href="http://www.hivdent.org/publicp/inter/">http://www.hivdent.org/publicp/inter/</a> ppeovcacik082000.htm>; Internet; accessed 15 January 2001.
  - <sup>16</sup> Central Intelligence Agency, World Fact Book 2000.
- <sup>17</sup> Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> <u>Fiscal Year 2001</u>, 57.
  - <sup>18</sup> Ibid., 160.
- <sup>19</sup> The White House, <u>U.S. Nigerian Cooperation on Peacekeeping and Military Reform</u>, 26 August 2000; available from <a href="http://www.eucom.mil/africa/nigeria/usis/00aug28.htm">http://www.eucom.mil/africa/nigeria/usis/00aug28.htm</a>; Internet; accessed 15 January 2001.
- <sup>20</sup> The White House, <u>The.United States and Nigeria: Expanding Trade and Investment</u>, 27 August 2000; available from <a href="http://www.eucom.mil/africa/nigeria/usis/00aug27.htm">http://www.eucom.mil/africa/nigeria/usis/00aug27.htm</a>; Internet; accessed 15 January 2001.
  - <sup>21</sup> Ibid.
  - <sup>22</sup> Census Bureau, HIV/AIDS Surveillance Data Base.
  - <sup>23</sup> Central Intelligence Agency, World Fact Book 2000.
- <sup>24</sup> Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> <u>Fiscal Year 2001</u>, 57.
  - <sup>25</sup> Ibid., 181.
  - <sup>26</sup> Census Bureau, HIV/AIDS Surveillance Data Base.
  - <sup>27</sup> O'Reilly.
- <sup>28</sup> Timothy Kalyegira, "One Fifth of South African Nurses HIV-Positive," United Press International; 5 September 2000; available from <a href="http://www.hivdent.org/publicp/inter/ppinofosan092000.htm">http://www.hivdent.org/publicp/inter/ppinofosan092000.htm</a>; Internet; accessed 15 January 2001.
  - <sup>29</sup> Gordon.
- <sup>30</sup> John Stremlau and Nthabiseng Nkosi, "The AIDS Toll on South Africa's Colleges," <u>Boston Globe</u>, 9 January 2001, sec A, p. 19.
  - 31 O'Reilly.
  - 32 Ibid.
  - <sup>33</sup> Central Intelligence Agency, World Fact Book 2000.

- Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> Fiscal Year 2001, 58.
  - 35 Ibid., 202.
- Department of State, <u>U.S. "Very Concerned" About Events in Zaimbabwe, Reeker Says</u>, 18 September 2000; available from <a href="http://www.eucom.mil/africa/zimbabwe/usis/00sep18.htm">http://www.eucom.mil/africa/zimbabwe/usis/00sep18.htm</a>; Internet; accessed 15 January 2001.
  - <sup>37</sup> Census Bureau, HIV/AIDS Surveillance Data Base.
- <sup>38</sup> General Accounting Office, <u>Golbal Health: The U.S. and U.N. Response to the AIDS Crisis in Africa</u> (Washingtion, D.C.: U.S. General Accounting Office, 24 February 2000), 2.
- <sup>39</sup> Carol Ezzell, "Care for a Dying Continent," <u>Scientific American</u> 282 (May 2000): 96. [database on-line]; available from UMI ProQuest Direct, Bell & Howell, UMI publication no. 00368733.
  - <sup>40</sup> Gordon.
- <sup>41</sup> Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> Fiscal Year 2000, 47-58.
- <sup>42</sup> Merle D. Kellerhals, Jr., "USAID Launches Biotechnology Initiatives with Africa" 12 January 2001; available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>; Internet; accessed 15 January 2001.
  - <sup>43</sup> General Accounting Office, 1.
  - <sup>44</sup> Ibid., 2.
  - 45 Ibid.
  - 46 Gordon.
- <sup>47</sup> Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> Fiscal Year 2000, 47-58.
- <sup>48</sup> "African Crisis Response Initiative," 10 October 2000; available from <a href="http://usinfo.state.gov/regional/af/afci">http://usinfo.state.gov/regional/af/afci</a>; Internet; accessed 15 January 2001.
- <sup>49</sup> "Summary of the African Crisis Response Initiative," 10 October 2000; available from <a href="http://usinfo.state.gov/regional/af/afci/acrisumm.htm">http://usinfo.state.gov/regional/af/afci/acrisumm.htm</a>; Internet; accessed 15 January 2001.
  - 50 Ibid.
- <sup>51</sup> Department of State, <u>Summary and Highlights, International Affairs, Function 150:</u> Fiscal Year 2000, 211.
  - 52 Gordon.

<sup>53</sup> Ibid.

<sup>&</sup>lt;sup>54</sup> Ibid.

<sup>&</sup>lt;sup>55</sup> "Simon Denyer, "Bush Era Heralds Marginalisation for Africa," Reuters, 18 December 2000; available from <a href="http://www.hivdent.org/publicp/inter/">http://www.hivdent.org/publicp/inter/</a> ppbehmfa122000.htm>; Internet; accessed 15 January 2001.

<sup>&</sup>lt;sup>56</sup> Gannon.

<sup>&</sup>lt;sup>57</sup> "Development Aid Must Be Linked to AIDS Fight: UN Official," Agence France Presse, 21 March 2000; available from <a href="http://www.hivdent.org/publicp/inter/">http://www.hivdent.org/publicp/inter/</a> ppdamblta032000.htm>; Internet; accessed 15 January 2001.

### **BIBLIOGRAPHY**

"African Crisis Response Initiative." 10 October 2000. Available from <a href="http://usinfo.state.gov/regional/af/afci">http://usinfo.state.gov/regional/af/afci</a>. Internet. Accessed 15 January 2001.

Coates, Thomas J., Olga Grinstead, and Steven Gregorich. "Efficacy of Voluntary HIV-1 Counselling and Testing in Individuals and Couples in Kenya, Tanzania, and Trinidad: A Randomized Trial." 8 July 2000. Available from <a href="http://www.hivdent.org/publicp/inter/ppeovcacik082000.htm">http://www.hivdent.org/publicp/inter/ppeovcacik082000.htm</a>. Internet. Accessed 15 January 2001.

Central Intelligence Agency. World Fact Book 2000. Available from <a href="http://www.odci.gov/cia/publications/factbook">http://www.odci.gov/cia/publications/factbook</a>>. Internet. Accessed 6 March 2001.

Denyer, Simon. "Bush Era Heralds Marginalisation for Africa." Reuters. 18 December 2000. Available from <a href="http://www.hivdent.org/publicp/inter/">http://www.hivdent.org/publicp/inter/</a> ppbehmfa122000.htm>. Internet. Accessed 15 January 2001.

"Development Aid Must Be Linked to AIDS Fight: UN Official." Agence France Presse. 21 March 2000. Available from <a href="http://www.hivdent.org/publicp/inter/ppdamblta032000.htm">http://www.hivdent.org/publicp/inter/ppdamblta032000.htm</a>. Internet. Accessed 15 January 2001.

Ezzell, Carol. "Care for a Dying Continent." <u>Scientific American</u> 282 (May 2000): 96-105. Database on-line. Available from UMI ProQuest Direct, Bell & Howell, UMI publication no. 00368733.

Fisher-Thompson, Jim. "Kenyan Survey Shows Firm Support for Multiparty Democracy." 12 January 2001. Available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>. Internet. Accessed 15 January 2001.

Fisher-Thompson, Jim. "White House Holds Conference on Problem of 'Conflict Diamonds." 10 January 2001. . Available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>. Internet. Accessed 15 January 2001

Gannon, John C. "The Global Infectious Disease Treat and Its Implications for the United States." National Intelligence Council. January 2000. Available from <a href="http://www.odci.gov/cia/publications/nie/report/nie99-17d.html">http://www.odci.gov/cia/publications/nie/report/nie99-17d.html</a>. Accessed 9 November 2000.

Gordon, David. "AIDS May Be Most Serious Health Threat in Recorded History." Speech. African Chiefs of Mission Meeting, Nairobi, Kenya, 11 January 2001. Available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>. Internet. Accessed 15 January 2001.

Hooks, Aubrey. "ACRI: Working with African Nations to Build Regional Stability." Interview by Susan Ellis. . Available from <a href="http://usinfo.state.gov/regional/af/acri/interview.htm">http://usinfo.state.gov/regional/af/acri/interview.htm</a>. Internet. Accessed 15 January 2001.

Kalyegira, Timothy. "One Fifth of South African Nurses HIV-Positive." United Press International. 5 September 2000. Available from <a href="http://www.hivdent.org/publicp/inter/ppinofosan092000.htm">http://www.hivdent.org/publicp/inter/ppinofosan092000.htm</a>. Internet. Accessed 15 January 2001.

Kellerhals, Merle D., Jr. "USAID Launches Biotechnology Initiatives with Africa." 12 January 2001. Available from <a href="http://usinfo.state.gov/products/washfile/af.shtml">http://usinfo.state.gov/products/washfile/af.shtml</a>. Internet. Accessed 15 January 2001.

O'Reilly, Brian. "Death of a Continent," <u>Fortune</u>, 142 (13 November 2000): 258-274 Database on-line. Available from UMI ProQuest Direct, Bell & Howell, UMI publication no. 00158259.

Stremlau, John and Nthabiseng Nkosi. "The AIDS Toll on South Africa's Colleges." Boston Globe. 9 January 2001, sec A, p. 19.

"Summary of the African Crisis Response Initiative." 10 October 2000. Available from <a href="http://usinfo.state.gov/regional/af/afci/acrisumm.htm">http://usinfo.state.gov/regional/af/afci/acrisumm.htm</a>. Internet. Accessed 15 January 2001.

Sweat, Michael, Steven Gregorich, and Gloria Sangiwa. "Cost-Effictiveness of Voluntary HIV-1 Counselling and Testing in Reducing Sexual Transmission of HIV –1 in Kenya and Tanzania." 8 July 2000. Available from <a href="http://www.hivdent.org/publicp/inter/ppceohrir082000.htm">http://www.hivdent.org/publicp/inter/ppceohrir082000.htm</a>. Internet. Accessed 15 January 2001.

The White House. <u>The.United States and Nigeria: Expanding Trade and Investment</u>. 27 August 2000. Available from <a href="http://www.eucom.mil/africa/nigeria/usis/00aug27.htm">http://www.eucom.mil/africa/nigeria/usis/00aug27.htm</a>. Internet. Accessed 15 January 2001.

The White House. <u>U.S. Nigerian Cooperation on Peacekeeping and Military Reform</u>. 26 August 2000. Available from <a href="http://www.eucom.mil/africa/nigeria/usis/00aug28.htm">http://www.eucom.mil/africa/nigeria/usis/00aug28.htm</a>. Internet. Accessed 15 January 2001.

- U.S. Census Bureau International Programs Center, Health Studies Branch. <u>HIV/AIDS</u> Surveillance Data Base. [CD-ROM], June 2000.
- U.S. Department of State. <u>Congressional Presentation for Foreign Operations: Fiscal Year 2000</u>. Washington D.C.: U.S. Department of State, 1999.
- U.S. Department of State. <u>Summary and Highlights, International Affairs, Function 150:</u> <u>Fiscal Year 2001</u>. Washington, D.C.: U.S. Department of State, 7 February 2000.
- U.S. Department of State. <u>U.S. "Very Concerned" About Events in Zaimbabwe, Reeker Says</u>. 18 September 2000. Available from <a href="http://www.eucom.mil/africa/zimbabwe/usis/00sep18.htm">http://www.eucom.mil/africa/zimbabwe/usis/00sep18.htm</a>. Internet. Accessed 15 January 2001.
- U.S. General Accounting Office. Golbal Health: The U.S. and U.N. Response to the AIDS Crisis in Africa. Washingtion, D.C.: U.S. General Accounting Office, 24 February 2000.

Yier, Agai. "Kenya: High AIDS Rate Among Nurses." African News Service. 30 August 2000. Available from <a href="http://www.hivdent.org/publicp/inter/ppinkharan082000.htm">http://www.hivdent.org/publicp/inter/ppinkharan082000.htm</a>. Internet. Accessed 15 January 2001.